

MAIL TO:
Office of the Attorney General
Registry of Charitable Trusts
P.O. Box 903447
Sacramento, CA 94203-4470

STREET ADDRESS:
1300 I Street
Sacramento, CA 95814
Telephone: (916) 323-5079

WEB SITE ADDRESS:
<http://ag.ca.gov/charities/>

COMMERCIAL FUND-RAISER FOR CHARITABLE PURPOSES

2002 ANNUAL FINANCIAL REPORT

(California Government Code Section 12599)

Failure to file annual financial report by January 30 annually for each calendar year of solicitation may result in fines or filing penalties as defined in Government Code Section 12586.1

An annual financial report must be filed for each event for each charity solicited for during the previous calendar year.



Name and Address of Commercial Fund-raiser: 139 TBS PRODUCTIONS 100 WEST RINCON AVE, STE 102 CAMPBELL, CA 95008-2898	Name and Address of Charitable Organization: CT No. <u>N/R</u> F.E.I.N. No. _____ San Mateo Co. Deputy Sheriffs Assn. Name of Charity P O Box 522 Address of Charity Redwood City, CA. 94064 City, State, and ZIP Code of Charity
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National Campaign ☐ California Campaign ☒

Family Variety Show

March 30, 2002

(Type of Activity)

(Date or dates must be shown)

Is the contract between the commercial fund-raiser and charity based upon a fee or percentage of revenue? (check one)
If other, provide brief explanation _____

Fee ☐ Percentage ☒
Other ☐

1. REVENUE

A. Cash contributions	_____	A.
B. Entertainment sales or admission charges	409847.00	B.
C. Sales from products	_____	C.
D. Advertisement sales	_____	D.
E. Membership fees	_____	E.
F. Other sources: (Specify)	_____	
a. _____	_____	Fa.
b. _____	_____	Fb.
c. _____	_____	Fc.
d. _____	_____	Fd.

G. TOTAL REVENUE

409847.00 G.

2. EXPENSES

A. Fees or commissions	327877.60	A.
B. Salaries	_____	B.
C. Payroll taxes	_____	C.
D. Employee benefits	_____	D.
E. Cost of merchandise for resale	_____	E.
F. Cost of entertainment	_____	F.
G. Postage	_____	G.
H. Advertising	_____	H.
I. Telephone	_____	I.
J. Rental of equipment	_____	J.
K. Facilities charge	_____	K.
L. Permits	_____	L.
M. Other expenses: (Specify)	_____	
a. _____	_____	Ma.
b. _____	_____	Mb.
c. _____	_____	Mc.
d. _____	_____	Md.

N. TOTAL EXPENSES

327877.60 N.

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3. Amount to Charity 81969.40 3.
4. Less additional fund-raising expenses paid by charity (to be completed by charity) _____ 4.
5. Less fair market value of goods and/or services used for the event which were paid by sponsor(s) _____ 5.
6. Net proceeds realized by charity from the campaign (subtract lines 4 and 5 from line 3) 81969.40 6.
7. (a) Does any officer, director, partner or owner of the Commercial Fund-raiser have any affiliation with or control over, directly or indirectly, the charitable organization for which the Commercial Fund-raiser has contracted to solicit?
- ☐ Yes ☒ No If "yes," complete the following:

Name of officer, director, partner or owner of Commercial Fund-raiser	Name and address of charitable organization	Relationship of officer, etc. To charitable organization

(b) For each affiliation identified in 7 (a), attach copy of the contract between the commercial fundraiser and the charity.

Under penalties of perjury, I declare that I have examined this report, including accompanying documents, schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete.

Signature of authorized officer (Commercial Fund-raiser) Michael G. Tremblay Printed Name Pres. Title 01/08/2003 Date

Signature of authorized officer/director (Charity) _____ s of the charitable organization for verifying the distribution.

Signature of authorized officer/director (Charity) MARY K. CHURLEY Printed Name PRESIDENT Title 1/12/03 Date

JAMES MEYER Printed Name TREASURER Title 1/12/03 Date

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